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## Patent Application Transmittal

(only for new nonprovisional applications under 37 C.F.R. 1.53(b))

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Date: October 5, 2001
Attorney Docket No.: 450117-03443

ASSISTANT COMMISSIONER FOR PATENTS Box Patent Application Washington, D.C. 20231

Sir:

With reference to the filing in the United States Patent and Trademark Office of an application for patent in the name(s) of:

Gerd SPALINK

entitled:

CYCLE SYNCHRONIZATION BETWEEN INTERCONNECTED SUB-NETWORKS

<u>X</u> X	Following are enclosed: Specification (9 pages) 2 Sheet(s) of Drawings 13 Claim(s) (including 2 independent claim(s)) This application contains a multiple dependent claim
<u>X</u>	Our check for $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $
<u> X</u>	Basic Fee, \$740.00 (\$370.00)       \$740.00         Number of Claims in excess of 20 at \$18.00 (\$9.00) each:       -0-         Number of Independent Claims in excess of 3 at \$84.00 (\$42.00) each:       -0-         Multiple Dependent Claim Fee at \$280.00 (\$140.00)       -0-         Total Filing Fee       \$740.00         Assignment Recording Fee \$40.00       \$40.00
X	Oath or Declaration and Power of Attorney  X New X signed unsigned Copy from a prior application (37 C.F.R. 1.63(d))
_X_	Certified copy of each of the following application(s) to substantiate the claim(s) for priority made in the Declaration:

Application No.

<u>Filed</u>

<u>In</u>

00 122 026.8

10 October 2000

Europe

Please charge any additional fees required for the filing of this application or credit any overpayment to Deposit Account No. 50-0320.

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP Attorneys for Applicant

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Date of De	enosit		October 5, 2001	-

I hereby certify that this paper or fee, and a patent application and accompanying papers, are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and are addressed to the Assistant Commissioner for Patents, Washington, DC 20231.

(Typed or printed name of person mailing paper or fee)

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